PTO/SB/06 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD 864 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 2) (Column I) **FOR** NUMBER EXTRA NUMBER FILED RATE RATE FEE FEE **BASIC FEE 5370** OR (37 CFR 1.16(a)) TOTAL CLAIMS minus 20 = 1008 OR (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = OR 2 ≖ (37 CFR 1.16(b)) (37 CFR 1.16(d)) MULTIPLE DEPENDENT CLAIM PRESENT OR TOTAL OR TOTAL If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE AMENDMENT **AFTER EXTRA PREVIOUSLY** FEE FEE **AMENDMENT** PAID FOR OR Total \*\* = Minus (37 CFR 1.16(c)) OR Independent \*\*\* = Minus (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) **CLAIMS** ADDI-HIGHEST ADDI-REMAINING PRESENT NUMBER RATE TIONAL TIONAL RATE MENDMENT **AFTER PREVIOUSLY EXTRA** FEE FEE **AMENDMENT** PAID FOR OR Total \*\* = Minus (37 CFR 1.16(c)) OR Independent \*\*\* ⋍ Minus OR (37 CFR 1.16(b)) ∢ (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 1) (Column 3) (Column 2) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL TIONAL RATE **AMENDMENT AFTER PREVIOUSLY EXTRA** FEE FEE AMENDMENT PAID FOR OR Total = Minus (37 CFR 1.16(c)) OR Independent \*\*\* = Minus (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT. FEE \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADDIT. FEE! \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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